

STATEMENT BY APPLICANT

(use as many sheets as necessary)

COMPLETE IF KNOWN

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|-----------------------------|------------------|
| Application Number | 10/553,554 |
| Filing Date | October 18, 2005 |
| First Named Inventor | Doherty et al. |
| Group Art Unit | 1626 |
| Examiner Name | Laura Stockton |
| Attorney Docket Number | 21375YP |

Sheet

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of

[illegible][illegible]

Examiner
Signature

Date
Considered

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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| Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | COMPLETE IF KNOWN | |
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